

Thomas Forslund, Director

Governor Matthew H. Mead

REPORT OF MISSING OR STOLEN BIRTH CERTIFICATE
(Only for birth's occurring in Wyoming)**Name, address, and phone number of person completing this form:**

Full Name: _____

Phone: _____

Address: _____

City, State, Zip: _____

Information on the birth certificate that is missing or stolen:

Full Name on Certificate: _____

Date of Birth: _____ City or County of Birth in Wyoming _____

Mother's Full Maiden Name: _____

About what date was the certificate missing or stolen: _____

Please write a brief statement about what happened to the birth certificate:

Signed: _____ Date: _____

Notice: In an effort to protect the Registrant from Identity Theft, records associated with lost or stolen birth certificates are flagged. Information may be shared with appropriate law enforcement agencies in an effort to protect the people of Wyoming from the threat of Identity Theft.

Return this form to:
Vital Records Services
Hathaway Building
Cheyenne, WY 82002